

April 20, 2007

Office of the Chancellor Telephone: 704/687-2201 Facsimile: 704/687-3219

Dr. Harold L. Martin Senior Vice President for Academic Affairs University of North Carolina General Administration Post Office Box 2688 Chapel Hill, North Carolina 27515-2688

Dear Dr. Martin:

Enclosed are five copies of a request for authorization to establish a new Bachelor of Science in Respiratory Therapy (B.S.R.T.). This program responds to the health care system's growing need for baccalaureate-prepared respiratory therapists. The B.S.R.T. has been approved at all appropriate levels on campus.

Thank you for your consideration of this request. Provost Joan Lorden or I would be pleased to respond to any questions that you may have regarding this request.

Cordially,

Philip L. Dubois Chancellor

Enclosures (5 copies)

cc: Provost Joan F. Lorden Dr. Karen Schmaling

The University of North Carolina at Charlotte

College of Health and Human Services

Department of Kinesiology

Request for Authorization to Establish

Bachelor of Science in Respiratory Therapy

THE UNIVERSITY OF NORTH CAROLINA Request for Authorization to Establish a New Degree Program

<u>INSTRUCTIONS</u>: Please submit <u>five</u> copies of the proposal to the Senior Vice President for Academic Affairs, UNC Office of the President. Each proposal should include a 2-3 page executive summary. The signature of the Chancellor is required.

Date: <u>4/20/2007</u>

Constituent Institution: <u>The University of North Carolina at Charlotte</u>
CIP Discipline Specialty Title: <u>Respiratory Care Therapy/Therapist</u>
CIP Discipline Specialty Number: <u>51.0908</u> Level: $B \boxtimes M \square 1^{st} Prof \square D \square$
Exact Title of Proposed Program: <u>Bachelor of Science in Respiratory Therapy</u>
Exact Degree Abbreviation (e.g. B.S., B.A., M.A., M.S., Ed.D., Ph.D.): <u>B.S.R.T.</u>
Does the proposed program constitute a substantive change as defined by SACS? Yes \Box No \boxtimes
a) Is it at a more advanced level than those previously authorized? Yes \Box No \boxtimes
b) Is the proposed program in a new discipline division? Yes 🗌 No 🔀
Proposed date to establish degree program (allow at least 3-6 months for proposal review):
month August year 2007
Do you plan to offer the proposed program away from campus during the first year of
operation?
Yes \square No \boxtimes

If so, complete the form to be used to request establishment of a distance learning program and submit it along with this request.

TABLE OF CONTENTS

Title	Page	1
Table	e of Contents	3
Exec	utive Summary	4
I.	Description of the Program	5
II.	Justification for the Program	6
III.	Program Requirements and Curriculum	13
IV.	Faculty	18
V.	Library	18
VI.	Facilities and Equipment	
VII.	Administration	20
VIII.	Accreditation	21
IX.	Supporting Fields	21
X.	Additional Information	21
XI.	Budget	22
XII.	Evaluation Plans	22
XIII.	Reporting Requirements	24

Appendices:

- A. Letters of Support
- B. Transfer credit analyses of six AAS programs in respiratory therapy
- C. Plan of course offerings
- D. Library consultation
- E. Budget projections for the first three years of program operation

Executive Summary

In 2004, there were nearly 3,300 respiratory therapists licensed with the North Carolina Respiratory Care Board as Certified Respiratory Therapists (CRT) or Registered Respiratory Therapists (RRT); the latter is the advanced credential. Licensure requires graduation from a program accredited by the National Board for Respiratory Care. There are 13 accredited respiratory care programs in the state, all of which are associate degree programs culminating in the Associate in Applied Science (AAS) degree. A very small minority of CRTs/RRTs in the state were trained in bachelor's degree programs (approximately 4 percent), as there are no bachelor's degree programs in respiratory therapy in North Carolina (or South Carolina); baccalaureate-prepared practitioners have moved to North Carolina from other states.

Although the associate's degree is the minimum educational degree required for the respiratory care field, "state and national stakeholders in respiratory therapy organizations believe that baccalaureate programs are necessary for practitioners to take on leadership roles within the profession in management, research, and advanced clinical areas... (and) to ensure qualified faculty are available to educate the future respiratory therapy workforce..." (p. 5, CAHNC, AHEC, and Sheps Center: *The State of Allied Health in North Carolina: A Focus on the Respiratory Therapy Workforce*, 2004). This further supports that the need is not to develop more entry-level programs (whether they are at the AAS or BS degree level); rather, the need is to develop advanced practitioners at the baccalaureate level.

The proposed RRT to BSRT completion program provides the associate degree-prepared registered respiratory therapist (RRT) an opportunity to earn their Bachelor of Science in Respiratory Therapy degree (BSRT). The curriculum is designed to enhance and advance the student's professional career in respiratory science with additional education in administration, research and evaluation, and advanced clinical care beyond their entry-level preparation. Further, the proposed degree program has been designed to compliment existing AAS degree programs that are offered in the State and not compete with them with respect to developing entry-level practitioners. Currently, efforts are underway in developing formal articulation agreements with local area community colleges to make the transfer to UNC Charlotte as streamlined as possible. The BSRT will add to the portfolio of allied health programs at UNC Charlotte, and will in particular complement existing clinical exercise physiology (MS), and nurse anesthetist (MSN) programs.

Students must complete general education courses before being admitted to the BSRT major. The BSRT curriculum is 39 hours in length and can be completed within one calendar year provided that the university's general education requirements are completed. It is proposed to use 5 existing and add 7 new courses. As respiratory therapy will be a new discipline for UNC Charlotte, appropriately trained and credentialed faculty will be hired, and library holdings will need to be enhanced.

It is estimated, conservatively, that 20 students will be admitted per year, achieving a steadystate enrollment of 85 students in four years, approximately 75 percent of whom will pursue the degree on a part-time basis.

This timely degree proposal addresses regional needs for enhancing the educational preparation of the respiratory therapy workforce, leading to improvements in patient care and the education of future respiratory therapists.

I. DESCRIPTION OF THE PROGRAM

A. Describe the proposed degree program (i.e., its nature, scope, and intended audience).

The proposed degree program is a baccalaureate degree completion program for students holding associate's degrees in respiratory therapy and holding current and valid licenses as respiratory therapists.

The American Medical Association recognizes Respiratory Therapy as an allied health care profession. In fulfillment of the advanced therapist role, the respiratory therapist may perform the following procedures (AMA, Health Professions Career and Education Directory 2005-2006):

- 1. Acquire and evaluate clinical data;
- 2. Assess the cardiopulmonary status of patients;
- 3. Perform and assist in the administration of prescribed diagnostic studies;
- 4. Participate in the development and modification of respiratory care plans;
- 5. Initiate, monitor, and modify prescribed therapy to achieve the desired therapeutic objectives;
- 6. Perform case management of patients with cardiopulmonary and related diseases;
- 7. Provide patient, family, and community education;
- 8. Promote cardiopulmonary wellness, disease prevention, and disease management;
- 9. Participate in advanced cardiopulmonary life support activities; and
- 10. Promote evidence-based medicine, research, and clinical practice guidelines.

The degree program provides respiratory therapists with advanced and specialized skills, including management and patient education skills. These advanced and specialized skills prepare respiratory therapists to assume professional roles in a variety of health care settings including acute care hospitals, long-term acute care hospitals, rehabilitation centers, durable medical equipment (DME) and home health care (HME) companies, pharmaceutical companies, outpatient centers, and physician offices. Additionally, baccalaureate-prepared respiratory therapists can address faculty needs to prepare entry-level practitioners in North Carolina's 13 community college-based respiratory therapy programs.

B. List the education objectives of the program.

The proposed new respiratory therapy degree completion program is based on the landmark tripartite statement issued by the American Association for Respiratory Care

(AARC), Committee on Accreditation for Respiratory Care (CoARC), and the National Board for Respiratory Care (NBRC) supporting the recommendation for the development of baccalaureate education in respiratory care and to encourage respiratory therapists to pursue advanced levels of education (Barnes et al., 2003. *Resp Care Educ Annual*, 12, 29-39).

Additionally, the North Carolina Association of Respiratory Educators (NCARE), the North Carolina Respiratory Care Board (NCRCB), and the North Carolina Society for Respiratory Care (NCSRC) support the advancement of respiratory care in North Carolina by encouraging the development of baccalaureate education in respiratory care for continued growth and advancement of the profession that requires every respiratory therapist to demonstrate an advanced level of critical thinking, disease management and patient education. This program will address the demand for practitioners with advanced and specialized skills to take on leadership roles within the profession in research, management, education, and advanced clinical areas.

C. Describe the relationship of the program to other programs currently offered at the proposing institution, including the common use of: (1) courses, (2) faculty, (3) facilities, and (4) other resources.

This new proposed degree is a specialized program in allied health care utilizing both an interdisciplinary and multidisciplinary approach within the College of Health and Human Services and throughout the University of North Carolina at Charlotte. This program will compliment the existing portfolio of degree programs in applied health areas, including public health, nursing, athletic training, exercise science, and social work. The degree program would be administratively housed in the Department of Kinesiology. The focus of the proposed program on the respiratory system is consistent with the Department's expertise in cardiovascular-pulmonary systems and function.

The new program will utilize five courses that are already being taught in existing programs, as well as common use of the University's General Education courses. The new program will need an additional seven courses to be developed specific to the respiratory therapy discipline.

II. JUSTIFICATION FOR THE PROGRAM

A. Describe the proposed program as it relates to:

1. The institutional mission and strategic plan

This proposed new program will contribute to the institutional mission of the University of North Carolina, primarily the Health Care and Health Policy mission of UNC Charlotte. This program will meet the mission in this area by providing both on- and off-campus educational opportunities and by providing research and collaborative relationships with public and private institutions in the Charlotte metropolitan area. The proposed program is responsive to Academic Affairs goal #1, "to enhance educational opportunities at the baccalaureate... level that are responsive to the intellectual, cultural, and economic needs of the region and which serve a diverse community of learners," and the College of Health and Human Services strategic goal #1 (2005-2010 Strategic Plan), "offer academic programs that are recognized for their excellence, and accessible and responsive to the needs of the region, state, and nation." As part of the 2005-2010 College Strategic Plan to address this goal, we noted we "should examine" the possibility of a Respiratory Therapy degree.

2. Student demand

It can be estimated that at least 50 percent of respiratory therapists desire to obtain a baccalaureate degree, and over 80 percent want to matriculate within five years (Becker & Gibson, 1999. *Resp Care*, 44(11), 1337-1352). The number of respiratory therapists with baccalaureate degrees has been steadily increasing over the last 15 years. In 1992, approximately 16percent had a minimum of a baccalaureate degree, and this number increased to 24.6percent in 2000 (Dubbs, 2000. *AARC Times*, 24(12), 34-42). In 2005, an estimated 32.5 percent of respiratory therapists held at least a baccalaureate degree (Dubbs, 2006. *AARC Times*, 30(6), 36-43). There are currently approximately 310 accredited respiratory therapy programs across the United States and only about 60 of those are baccalaureate programs. The current trend supports the need for a greater number of respiratory therapy baccalaureate programs, especially in North Carolina in which there is significantly limited access to such programs.

In 2005, a member of the North Carolina Respiratory Care Board stated, "In North Carolina we graduate 200 new respiratory care practitioners a year. I would estimate that 50 percent are seeking a baccalaureate degree. According to our most recent survey of 300 therapists in the state, 100 percent indicated a desire for such a program. Our most conservative estimates would be that 50-75 people per year would be interested in seeking such a degree." In Section I.C. (Headcount Enrollment) below, we estimated that only half this number would actually enroll in the proposed program per year because such surveys usually overestimate the number of persons who actually apply, and because the survey did not include details of a proposed curriculum or the credit hours involved; as most respiratory therapists are AAS graduates, they will need some general education courses, in addition to courses in the discipline, which may dampen some of the enthusiasm.

3. <u>Societal need</u> (For graduate, first professional, and baccalaureate professional programs, cite manpower needs in North Carolina and elsewhere.)

Respiratory therapy has become a highly complex occupation in the 21st century. Increasingly, respiratory therapists are assuming greater roles in patient assessment and protocols in disease-state management in all clinical settings; end-of-life and palliative care; smoking cessation and prevention programs; detection and intervention in chronic obstructive pulmonary disease (COPD); home care (Pierson, 2001. *Resp Care*, 46, 705-718); pulmonary rehabilitation; and as community-based asthma educators. Additionally, respiratory therapists are assuming greater roles in health promotion and disease prevention patient education. However, reimbursement for services provided by respiratory therapists is limited by inconsistent recognition of the profession. With less than a baccalaureate degree, respiratory therapists are often not recognized as professionals by government agencies, third party payers, the military, labor unions, and others (Barnes et al., 2003. *Resp Care Educ Annual*, 12, 29-39).

Respiratory therapists participate in advanced practices including emergency airway management and intubation; initiation and management of non-critical care therapist driven protocols (TDPs), ventilator weaning protocols, high frequency oscillation ventilation (HFOV), inhaled nitric oxide (INO), heliox, extracorporeal life support (ECLS), neonatal surfactant replacement therapy (SRT), hyperbaric oxygenation (HBO), hemodynamic monitoring, emergency ground and air transport; and assistance with bedside bronchoscopy and tracheostomy procedures. The proposed program will offer students clinical and classroom opportunities to explore these advanced level practices.

Additionally, the demand for respiratory therapists with advanced level training will increase due to advances in treatment options and technology and increases in the population, especially those aged 65 years and older. It is estimated that by the year 2030 that the number of adults over the age 65 years will have grown to 70 million. Furthermore, in 2011 the baby boomer generation will begin reaching 65 years. Currently, approximately 60 percent of all users of health care services are over the age of 65 years. Elderly adults have the highest incidence of chronic disease and health related complications (Williams et al., 1995. *JAMA*, 274, 1677-1682) including respiratory cardiopulmonary diseases such pneumonia, COPD, congestive heart failure (CHF) and ischemic heart disease.

As the curricular requirements to prepare respiratory therapists continue to expand, it will become increasingly difficult to prepare students with the knowledge and skills required in the current complex and diverse health care environment in an associate degree program. Due to budget constraints, some state governments have limited associate degree curricula in community colleges to 60 semester hours, which limits what can be taught (Barnes et al., 2003. *Resp Care Educ Annual*, 12, 29-39). In order to adequately prepare respiratory therapists to assume greater roles as health care professionals, the number of respiratory therapy programs must increase.

Finally, baccalaureate programs are necessary to ensure that qualified faculty members are available to educate the future respiratory therapy workforce and meet CoARC accreditation requirements. Key personnel in respiratory therapy programs, as required by CoARC, must have at least a baccalaureate degree. Currently, North Carolina respiratory therapy programs report difficulty finding both clinical and didactic faculty to teach curriculum, which has affected the programs' ability to expand enrollments (The State of Allied Health in North Carolina, 2004).

Additionally, nearly half of the current program directors, one-third of clinical directors and other faculty will retire within the next ten years (Dubbs, 2006. *AARC*

Times, 30(6), 36-43). The proposed program will help fill this need for local colleges that offer an accredited, entry-level program.

Please see letters of support addressing the need for this baccalaureate program in Appendix A (letters from supporting units at UNC Charlotte also are included here).

4. <u>Impact on existing undergraduate and/or graduate academic programs of your institution</u>. (e.g., Will the proposed program strengthen other programs? Will it stretch existing resources? How many of your programs at this level currently fail to meet Board of Governors' productivity criteria? Is there a danger of proliferation of low-productivity degree programs at the institution?)

There is ample evidence that a BSRT program is needed in our State to strengthen the skills of the respiratory care workforce beyond what is obtained through their entrylevel preparation. The program will complement and strengthen/be strengthened by other programs. The BSRT fits well with existing clinically-oriented degrees in athletic training and nursing offered in the College, and the community and population health focus of the BSPH. BSRT graduates interested in graduate study related to cardiopulmonary function may pursue our M.S. in Clinical Exercise Physiology; BSRT graduates interested in population health and bolstering their research skills may pursue our MSPH degree program in the future.

In terms of the possibility of stretching resources, as the campus adds degrees, there may be a general need to increase the number of sections of some courses, such as in the existing courses these students may utilize in general education and in the upper division. The value of the proposed program is that accreditation is not required, thus the amount resources needed to launch this program are not nearly as extensive.

UNC Charlotte had 29 programs that graduated 19 or fewer students for the past two years (2004-05 and 2005-06), failing to meet part of the Board of Governors productivity criteria. Only one (athletic training) was in the College of Health and Human Services. It failed to meet the criteria because of a single low enrollment year. Subsequently, its enrollment has been responsive to enhanced recruiting and retention efforts. We are confident that extant need and demand for the BSRT will prevent it being a low productivity program.

B. Discuss potential program duplication and program competitiveness

1. Identify similar programs offered elsewhere in North Carolina. Indicate the location and distance from the proposing institution. Include a) public and b) private institutions of higher education.

Currently, there are no baccalaureate respiratory therapy programs in North Carolina or South Carolina. In 2004, there were approximately 3,300 licensed respiratory therapists in North Carolina with only approximately 15 percent holding baccalaureate degrees in any field, which falls significantly behind the national workforce percentage of 32 percent reported in the 2005 Respiratory Therapy Human Resources Study. Since there are no such programs in North Carolina, those

practitioners holding baccalaureate degrees obtained them from outside of North Carolina and those seeking a baccalaureate degree must look outside of the state. This situation creates an unwanted challenge to respiratory therapists seeking a baccalaureate degree due to inaccessibility and significantly higher tuition costs for out-of-state programs. Accessibility to higher education is vital to continued growth of the respiratory therapy profession in North Carolina. The following is a list of the closest public and private institutions located in Georgia, Kentucky, Tennessee, Virginia, and West Virginia that offer at least one baccalaureate program in respiratory therapy.

a) public institutions

University	Distance from UNC Charlotte
East Tennessee State University	145 miles
Medical College of Georgia	165 miles
Mountain State University	210 miles
Georgia State University	240 miles
Armstrong Atlantic State University	255 miles
Tennessee State University	420 miles

b) private institutions

Private Institution	Distance from UNC Charlotte
Shenandoah University	360 miles
Bellarmine University	460 miles
Baptist College of Health Sciences	630 miles

2. Indicate how the proposed new degree program differs from other programs like it in the University. If the program duplicates other UNC programs, explain a) why is it necessary or justified and b) why demand (if limited) might not be met through a collaborative arrangement (perhaps using distance education). If the program is a first professional or doctoral degree, compare it with other similar programs in public and private universities in North Carolina, in the region, and in the nation.

The proposed program differs significantly from other degree programs being offered at the University. As noted previously, no programs exist in North Carolina so it does not duplicate other UNC programs. The location of UNC Charlotte makes it a desirable site for the respiratory therapy program in several ways: (1) we are accessible to students in both North Carolina and South Carolina, and neither state has a baccalaureate degree program in respiratory care; (2) we are located in the largest metropolitan area in both states, so we are best positioned to serve the largest number of students; (3) there are large healthcare systems and many regional healthcare facilities in and near Charlotte, facilitating access to clinical practicum sites and respiratory care practitioners; and (4) we have existing educational collaborations with these healthcare facilities – the proposed program would also be responsive to their needs for practitioners with advanced skills.

Our proposed RRT-to-BSRT program is similar to existing degree completion programs in the field. For example, at the University of Missouri School of Health Professions, their online degree completion program awards advanced standing credit for completed coursework and licensure, and requires approximately 27 credit hours of respiratory therapy courses (including advanced clinical courses, practicum, community health, ethics, administration, and research) and 12 credit hours of elective courses. The University of Arkansas for Medical Sciences RRT-to-BS in Cardio-Respiratory Care awards 40 hours of credit for previous coursework and licensure, and requires 18 credit hours of online coursework (including advanced clinical courses, capstone, research, and community health).

C. Enrollment (baccalaureate programs should include only upper division majors, juniors, and seniors).

Headcount enrollment

Show a five-year history of enrollments and degrees awarded in similar programs offered at other UNC institutions (using the format below for each institution with a similar program); indicate which of these institutions you consulted regarding their experience with student demand and (in the case of professional programs) job placement. Indicate how their experiences influenced your enrollment projections.

University	Data	Year				
Chiversity	Dutu	<u>2001-02</u>	<u>2002-03</u>	<u>2003-04</u>	<u>2004-05</u>	<u>2005-06</u>
<u>Georgia State</u>	Fall Enrollment	28	32	34	33	23
<u>University</u>	Degrees awarded	22	19	21	29	17
East Tennessee	Fall Enrollment	15	17	16	17	N/A
<u>State University</u>	Degrees awarded	3	10	15	10	10

Program Title: <u>Respiratory Therapy B.S. Degree Program</u>

*Requested information on enrollment and graduation numbers from the above listed programs.

Use the format in the chart below to project your enrollment in the proposed program for four years and explain the basis for the projections:

Assumptions: Assume that 10 FT and 20 PT students are admitted each year as most of the students will continue to work and pursue their degree on a PT basis. Assume program attrition of two FT and two PT students per year. Assume that 67 percent of FT students finish in two years and the remaining FT students finish in three years. Assume that 50 percent of the PT students finish in three years and the remaining PT students finish in four years. (See also data in section II.A.2., Student Demand.)

	Year 1 (2007-08)	Year 2 (2008-09)	Year 3 (2009-10)	Year 4 (2010-11)
Full-time	10	18	21	21
Part-time	20	38	56	65
TOTALS	30	56	78	86

Please indicate the anticipated steady-state headcount enrollment after four years:

Full-time21Part-time65Total86

SCH production (upper division program majors, juniors and seniors *only*, for baccalaureate programs). Use the format in the chart below to project the SCH production for four years. Explain how projections were derived from enrollment projections (see UNC website for a list of disciplines comprising each of the four categories).

Assumptions: each FT student takes 15 SCH/long semester; half of the PT students take 6 SCH/semester and the other half 9 SCH/semester, with the attrition and graduation assumptions as outlined above, therefore, for example:

Year 1: (10 FT x 30 SCH) +	(10 PT x 18 SCH) +	(10 PT x 12 SCH) = 600 SCH.
	((

Year 1: 2007-08	Student Credit Hours (SCH)		
Program Category	UG	Master's	Doctoral
Category I			
Category II			
Category III	600		
Category IV			

Year 2: 2008-09	Student Credit Hours (SCH)		
Program Category	UG	Master's	Doctoral
Category I			
Category II			
Category III	1110		
Category IV			

Year 3: 2009-10	Student Credit Hours (SCH)		
Program Category	UG	Master's	Doctoral
Category I			
Category II			
Category III	1470		
Category IV			

Year 4: 2010-11	Student Credit Hours (SCH)			
Program Category	UG Master's Doctora			
Category I				
Category II				
Category III	1590			
Category IV				

III. Program Requirements and Curriculum

A. Program Planning

1. List the names of institutions with similar offerings regarded as high quality programs by the developers of the proposed program.

Georgia State University Medical College of Georgia Wheeling Jesuit University

- 2. List other institutions visited or consulted in developing this proposal. Also list any consultants' reports, committee findings, and simulations (cost, enrollment shift, induced course load matrix, etc.) generated in planning the proposed program.
 - Georgia State University Linda T. Goodfellow, Ed.D., RRT Program Director (phone conversation on 7/21/2006)
 - Medical College of Georgia Arthur A. Taft, Ph.D., RRT Program Director (phone conversation on 7/21/2006)
 - Wheeling Jesuit University Marybeth M. Emmerth, M.S., RRT, CPFT Program Director (meeting on 8/18/2006)

- William Croft, B.S., RRT, RCP, Professor/Coordinator, Respiratory Therapy, Sandhills Community College; Member, North Carolina Respiratory Care Board (NCRCB) and Chair, NCRCB Education Committee (meeting on 2/1/06 and many emails)
- Joseph Coyle, MD, Carolinas Medical Center; Chair, North Carolina Respiratory Care Board (meeting on 7/26/05 and many emails)
- Croft, W. and contributors. (undated). *Bachelor of science degree in respiratory therapy*.

B. Admission. List the following:

1. Admissions requirements for proposed program (indicate minimum requirements and general requirements).

Each student would complete the following process to apply to the Respiratory Therapy program:

- 1) Cumulative GPA of 2.0 or better in all previous college coursework;
- 2) Must have graduated from a CAAHEP-accredited respiratory therapy program; and
- 3) Must hold the NBRC RRT credential and be in good standing.

2. Documents to be submitted for admission (listing or sample).

- 1) Program application
- 2) Proof of current BLS/CPR for health care providers certification
- 3) Proof of current and valid respiratory care practitioner state license as required
- 4) Proof of NBRC credentials as Registered Respiratory Therapist (RRT)
- 5) Official transcripts from all post-secondary academic work
- 6) Proof of medical exam and current immunizations including Hepatitis B vaccine

C. Degree requirements. List the following:

1. Total hours required. Major. Minor.

A minimum of 120 semester hours will be required for graduation with B.S.R.T. in Respiratory Therapy. At the most 64 hours will be transferred, 39 hours will be taken in the major, and the remaining hours will be comprised of general education and electives courses. Coursework taken in Respiratory Care completed during students' AAS Degree program in Respiratory Care / Respiratory Therapy will count towards the 120 hours needed to complete the B.S.R.T. degree after the student successfully completes RESP 4111 (practicum course). Accordingly, all courses taken for the AAS major in Respiratory Care / Respiratory Therapy will transfer.

2. Proportion of courses open only to graduate students to be required in program (graduate programs only).

N/A

3. Grades required.

- 1) Students must achieve a grade of "*C*" or better in all required Respiratory Therapy courses.
- 2) Students must achieve at least a 2.0 grade point average in order to graduate from the degree program.

4. Amount of transfer credit accepted.

A maximum of 64 credit hours will be accepted. The courses will include a combination of Respiratory Care / Respiratory Therapy courses, as well as general elective courses from the respective Community College.

5. Other requirements (e.g. residence, comprehensive exams, thesis, dissertation, clinical or field experience, second major, etc.)

Practicum is a capstone course that includes experience practicing in an advanced clinical or administrative setting; writing a capstone paper addressing the knowledge, skills, and abilities of the practica; and public speaking experience through presenting the paper in class.

6. Language and/or research requirements.

Each student must have English language proficiency. If the student uses English as a second language, they must meet the minimum University requirement of at least 180 on the computer-based TOEFL test.

7. Any time limits for completion.

There are no time limits for the completion of this program.

D. List existing courses by title and number and indicate (*) those that are required. Include an explanation of numbering system. List (under a heading marked "new") and describe new courses proposed.

Note: most RRTs in North Carolina have graduated from AAS degree programs necessitating taking a number of courses in general education. Each student should review their transcripts with an advisor to determine his/her needs, but see Appendix B for an analysis of the general education needs of RT AAS graduates from six programs in the state. Further, formal articulation agreements with CPCC (see Appendix B) and other local area community colleges are underway in an effort to create a smooth transfer process. The General Education requirements and electives listed below are based on the courses that AAS students will typically need. Courses in the major (39 hours) can be completed by full-time students in a 12-month period (see Appendix C).

General Education requirements (9 or more hours, depending on transfer credits):

LBST 2102 - Global Understanding (3) LBST 2211 to LBST 2215 - Ethical and Cultural Critique (3) STAT 1220 to STAT 1222 - Statistics (3)

Electives (3 or more hours, depending on transfer credits):

Electives (3+)

Existing courses required for the Respiratory Therapy program (12 hours):

HLTH 3104 - Research & Statistics in Healthcare (3) HLTH 3104L - Research & Statistics in Healthcare LAB (1) HLTH 4104 - Epidemiology (3) NURN 4201 - Information Technology: Applications in Health Care (2) PHIL 3228 - Healthcare Ethics (3) (W)

New courses required for the Respiratory Therapy program (27 hours):

*RESP 3101 – Professional Roles and Dimensions of Respiratory Therapy (3)
*RESP 3102 – Outpatient Services in Respiratory Therapy (3)

*RESP 3103 – Advanced Pharmacology in Respiratory Therapy (3)

*RESP 3104 – Advanced Critical Care Monitoring (3)

*RESP 4101 – Program Design, Implementation, and Outcomes Evaluation (3)

*RESP 4102 – Program Administration (3)

*RESP 4111 – Practicum (1-9) (W) (O) Admitted students will be awarded approximately 50 university credit hours upon successful completion of 9 credits of RESP 4111 (the exact number will be based on the difference between the credits in their AAS program and the number of transferable credits to UNC Charlotte).

New course descriptions proposed for the Respiratory Therapy program:

RESP 3101 Professional Roles and Dimensions of Respiratory Therapy (3)

Course Description: This course encompasses an introduction to the history, trends, issues, and evolution of the respiratory therapy profession. The course includes an overview of selected respiratory theories and an analysis of the professional environment for the current and future practice of respiratory care. Topics and emphasis may vary. (Fall)

RESP 3102 Outpatient Services in Respiratory Therapy (3)

Course Description: This course encompasses an introduction to the history, trends, issues, and evolution of outpatient services and reimbursement of the respiratory therapy profession. The course includes selected respiratory care theories and practices in alternate-care sites including pulmonary diagnostics, pulmonary rehabilitation, home care, sub-acute care. Topics and emphasis may vary. (Fall)

RESP 3103 Advanced Pharmacology in Respiratory Therapy (3)

Course Description: This course builds upon a basic understanding of the concepts and principles of pharmacology as applied in respiratory therapy in the management of patients with cardiopulmonary disease and critical care. (Fall)

RESP 3104 Advanced Critical Care Monitoring (3)

Course Description: This course is a study of advanced cardiopulmonary monitoring used with critical care patients. Topics include, but are not limited to, hemodynamic monitoring, mechanical ventilator waveform graphic analysis, and capnography. (Fall)

RESP 4101 Program Design, Implementation, and Outcomes Evaluation (3)

Course Description: Evidence-based methods and techniques to design, implement, and evaluate healthcare quality control/improvement initiatives, and patient and population education programs. (Spring)

RESP 4102 Program Administration (3)

Course Description: Administrative, financial, human resource, legal, and policy concepts and issues in outpatient, inpatient, public, and private sector settings. Topics and emphases may vary. (Spring)

RESP 4111 Practicum (1-9) (W) (O)

Course Description: This course includes experiences in a chosen focus area (clinical, administrative, or population-based). This experience will culminate in a capstone project in the form of research or other scholarly activity that articulates the design, organization, statistics and data analysis used and includes an oral and written presentation of the project. This course meets the University's General Education requirements for Writing in the Discipline and Oral Communication. (Fall, Spring, Summer)

Numbering System: The upper division courses are numbered to reflect the year (junior or senior) and the sequence in which they ideally should be taken.

IV. FACULTY

A. List the names of persons on the faculty who will be directly involved in the proposed program. Provide complete information on each faculty member's education, teaching experience, research experience, publications, and experience in directing student research, including the number of theses and dissertations directed for graduate programs. The official roster forms approved by SACS can be submitted rather than actual faculty vita.

We are currently recruiting for an appropriately credentialed inaugural member of the faculty commencing Fall 2007 (i.e., a master's-prepared RRT)

B. Estimate the need for new faculty for the proposed program for the first four years. If the teaching responsibilities for the proposed program will be absorbed in part or in whole by the present faculty, explain how this will be done without weakening existing programs.

We anticipate needing one new faculty member in each of 2007-08, 2008-09, and 2009-2010 years to offer the RESP courses, and coordinate the administrative and clinical components of the program.

C. If acquisition of new faculty requires additional funds, please explain where and how these funds will be obtained.

The new faculty monies will be obtained through enrollment increase funding. This program is a Category III program and based on the 2006-07 UNC system's enrollment change formula productivity matrix, 404 SCHs are required to fund a new faculty position. The SCH generation in section II.C., above, suggests that the proposed faculty growth (section IV.B., above) is justified and will be supported by SCH production.

D. Explain how the program will affect faculty activity including course load, public service and scholarly research.

As the program will support new faculty growth through enrollment increase, the addition of new faculty should help support in particular teaching and service, as the program will further strengthen our ties with hospitals for practicum sites and the associate degree programs in community colleges.

V. LIBRARY

A. Provide a general statement as to the adequacy of present library holdings for the proposed program.

Please see the library consultation report in Appendix C. Library holdings are deemed "adequate only if department purchases additional holdings."

B. State how the library will be improved to meet program requirements for the next five years. The explanation should discuss the need for books, periodicals, reference materials, primary source materials, etc. What additional library support must be added to areas supporting the proposed program?

We will need to expand journal and book holdings in respiratory therapy to complement the existing holdings in respiratory physiology, respiratory diseases, and respiratory medicine. The College has a history of providing resources to the Library, when necessary, to augment existing library resources and budget; the College is committed to doing so again to enhance the library holdings.

C. Discuss the use of other institutional libraries

Our Library is a member of Association of Southeastern Research Libraries (ASERL), designating it as one of the top 36 libraries in the southeast; a Federal Depository Library; a member of regional library consortia (including NC LIVE and others); and has a well functioning interlibrary loan system for access to thousands of other libraries' holdings. UNC Charlotte faculty and students also may access the Charlotte Area Health Education Center (AHEC), located a short drive from campus, for electronic access to a large network of resources including full-text journals and patient education materials.

VI. FACILITIES AND EQUIPMENT

A. Describe facilities available for the proposed program.

The BSRT program will be housed in the new 161,000 square foot College of Health and Human Services building, unless sufficient space can be found in the Belk Gymnasium. The new College building includes four floors of offices, over 40 classrooms, four Skills Laboratories, 10 Conference Rooms, one Computer laboratory and three Computer classrooms. All classrooms, conference rooms and laboratories are equipped with mounted LCD projectors, instructor computers, DVD, VCR, and control system for greater ease of use. We will likely have capacity to capture lectures, with audio, video and content (PowerPoint, computer screen, etc.) from these spaces to be able to offer asynchronous learning opportunities.

B. Describe the effect of this new program on existing facilities and indicate whether they will be adequate, both at the commencement of the program and during the next decade.

The BSRT program will not put undue strain on the current facilities. Over the next decade, it will be important to provide upgraded instructional technology and general technology support to the faculty.

C. Discuss any information technology services needed and/or available.

There is excellent information technology equipment and support available to the program. All programs in the College enjoy both centralized (through Information

Technology Services) and decentralized (College of Health and Human Services Health Informatics) staff, equipment, and services.

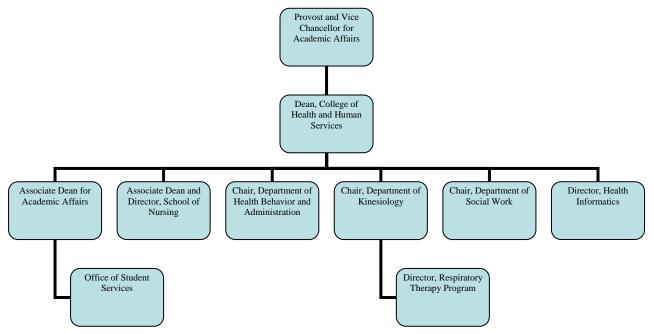
D. Discuss sources of financial support for any new facilities and equipment.

Financial support is available through appropriated State funds, and funds (or goods) donated by individuals, corporations, or foundations. There also is the possibility of receiving funding through grantwriting to fund educational, research, or service activities.

VII. ADMINISTRATION

Describe how the proposed program will be administered giving the responsibilities of each department, division, school, or college. Explain any inter-disciplinary or interunit administrative plans. Include an organizational chart showing the "location" of the proposed program.

The program will be administratively housed in the Department of Kinesiology. The Program Coordinator will report to the Chair of Kinesiology who reports to the Dean of the College of Health and Human Services, who reports to the Provost and Vice Chancellor for Academic Affairs. Please see the organizational chart below.



VIII. ACCREDITATION

Indicate the names of all accrediting agencies normally concerned with programs similar to the one proposed. Describe plans to request professional accreditation. It the proposed new degree program is at a more advanced level than those previously authorized or if it is in a new discipline division, was SACS notified of a potential "substantive change" during the planning process? If so, describe the response from SACS and the steps that have been taken to date with reference to the applicable procedure.

Respiratory Therapy educational programs are accredited by the Committee on Accreditation of Respiratory Care (CoARC) under the auspices of the Commission on Accreditation of Allied Health Education Programs (CAAHEP). The proposed program *does not* require CoARC accreditation because students entering the proposed program will have already graduated from a CoARC/CAAHEP-approved program meeting all requirements for entry-level practice. The proposed program is not intended to prepare entry-level practitioners; instead, it is designed to utilize previous education, knowledge and experience to provide *advanced and specialized* skills to prepare respiratory therapists to assume leadership roles within the profession in research, management, education, and advanced clinical areas. It is important; however, that CoARC be notified and kept informed of the development and implementation of the proposed program in that they may recommend specific program monitoring on a regular basis to ensure program quality and effectiveness based on national standards.

IX. SUPPORTING FIELDS

Are other subject-matter fields at the proposing institution necessary or valuable in support of the proposed program? Is there needed improvement or expansion of these fields? To what extent will such improvement or expansion be necessary for the proposed program?

As noted in section II.A.4., there may be a need to add more sections of supporting courses.

X. ADDITIONAL INFORMATION

Include any additional information deemed pertinent to the review of this new degree program proposal.

None noted.

XI. BUDGET

Provide estimates (using the attached form) of the <u>additional costs</u> required to implement the program and identify the proposed sources of the additional required funds. Use SCH projections (section II.C.) to estimate new state appropriations through enrollment increase funds. Prepare a budget schedule for each of the first three years of the program, indicating the account number and name for all additional amounts required. Identify EPA and SPA positions immediately below the account listing. New SPA positions should be listed at the first step in the salary range using the SPA classification rates currently in effect. Identify any larger or specialized equipment and any <u>unusual</u> supplies requirements.

For the purposes of the second and third year estimates, project faculty and SPA position rates and fringe benefits rates at first year levels. *Include the continuation of previous year(s) costs in second and third year estimates.*

Additional state-appropriated funds for new programs may be limited. Except in exceptional circumstances, institutions should request such funds for no more than three years (e.g., for start-up equipment, new faculty positions, etc.), at which time enrollment increase funds should be adequate to support the new program. Therefore it will be assumed that requests (in the "New Allocations" columns of the following worksheet) are for one, two, or three years unless the institution indicates a continuing need and attaches a compelling justification. However, funds for new programs are more likely to be allocated for limited periods of time.

Please see Appendix E.

XII. EVALUATION PLANS

All new degree program proposals and degree program track descriptions must include an evaluation plan which includes: (a) the criteria to be used to evaluate the quality and effectiveness of the program, (b) measures to be used to evaluate the program, (c) expected levels of productivity of the proposed program/track for the first four years of the program (numbers of graduates), (d) the names, addresses, and telephone numbers of at least three persons...qualified to review this proposal and to evaluate the program once operational, and (e) the plan and schedule to evaluate the proposed new degree program prior to the completion of its fifth year of operation once fully established.

A. Criteria to be used to evaluate the proposed program (not in an order of priority).

The program will be evaluated on several dimensions including program functioning and viability, and student success and outcomes. Program functioning and viability will be reflected in the quality of the program faculty and students and effectiveness of the program. Student success and outcomes will be based on procedures to assess and document that students have mastered the expected material and skills, have achieved a sufficient level of competence in the field, and, post-graduation, are successful in their careers.

B. Measures to be used to evaluate the program:

- Quality of program faculty will be measured by success in recruitment, hiring, retention, and promotion.
- Student quality will be measured by the number and quality of student applications; proportion of accepted students who enroll; student attrition and retention; student progress to the degree and graduation rates.
- Student success and learning outcomes will be measured by tests, examinations, written projects/reports, and performance evaluations in their practicum
- Student success will be measured by documenting the number and location of professional presentations made at the local, state, regional and national levels.
- Student success will also be measured by tracking professional mobility (job placements) following completion of the BSRT degree.
- Student post-graduation outcomes will be measured by post-graduation/alumni and employer surveys of student and employer satisfaction and professional accomplishments.

C. Projected productivity levels (numbers of graduates):

	Year 1	Year 2	Year 3	Year 4	TOTALS
	(2007-2008)	(2008-2009)	(2009-2010)	(2010-2011)	
В	0	6	17	26	49
М					
I/P					
D					

D. Recommended consultants/reviewers: Names, titles, addresses, e-mail addresses, and telephone numbers. May not be employees of the University of North Carolina.

- Lynda T. Goodfellow, EdD, RRT, FAARC Associate Professor, Program Director, Georgia State University, College of Health and Human Services, PO Box 4019, Atlanta, Georgia 30302-4019 – <u>ltgoodfellow@gsu.edu</u> – (404) 651-1498
- Jonathan B. Waugh, PhD, RRT, RPFT Associate Professor, Director of Clinical Education, University of Alabama at Birmingham, School of Health Related Professions, Department of Critical Care, RMSB 480, 1530 3rd Ave S, Birmingham, Alabama 35294-1212 – <u>waughj@uab.edu</u> – (205) 934-3783
- Arthur A. Taft, PhD, RRT Associate Professor, Program Director, Medical College of Georgia, School of Allied Health, Department of Respiratory, 1120 15th Street, Augusta, Georgia 30912-0850 - <u>ATAFT@MCG.EDU</u> - (706) 721-3554

E. Plan for evaluation prior to sixth operational year.

Prior to the sixth operational year, the program will arrange for external consultation by faculty/administrators from respiratory care baccalaureate programs with reputations for excellence to visit campus, interview faculty and students, review the curriculum, and review program evaluation data including surveys of current student advising, student outcomes, and alumni and employer satisfaction. The consultation will result in a report of program strengths, weaknesses, and recommendations for enhancement that will be subsequently reviewed by the program and department faculty for action and implementation.

REPORTING REQUIREMENTS IX.

Institutions will be expected to report on program productivity after one year and three years of operation. This information will be solicited as a part of the biennial longrange planning revision.

Proposed date of initiation of proposed degree program: Fall 2007

This proposal to establish a new program has been reviewed and approved by the appropriate campus committees and authorities.

Chancellor Philip Auton

Date 4/21/07

APPENDIX A Letters of Support



Carolinas Medical Center

November 17, 2006

Karen Schmaling, Ph.D.

Respiratory Care Department Uni Joseph P. Coyle, MD 920 Medical Director

Dean, college of Health and Human Services ^{tt} University of North Carolina at Charlotte ⁹ 9201 University City Blvd. ^{or} Charlotte, NC 28223

Dear Dr. Schmaling,

I am writing in support of the establishment of a Baccalaureate Program for Respiratory Care in North Carolina, and specifically at UNCC. The practice of respiratory care has become increasingly complex over the past 30 years. Therapists were initially educated "on the job." Then in the 70's, the associate level programs were developed to meet the evolving complexity of respiratory care. The role of Respiratory Therapists has continued to expand and now includes critical care transport, extracorporeal membrane oxygenators, hyperbaric therapy, and sleep medicine in addition to the usual functions in intensive care and outpatient services. Baccalaureate level programs for Respiratory Therapists have been established in over 30 states, in response to the increased complexity and to enhance the professional status of respiratory care. There is currently no Baccalaureate level program in North or South Carolina.

Baccalaureate level therapists fill an increasing percentage of positions in our state. They typically become involved in advanced practice positions, administration, research, and education. The North Carolina Respiratory Care Board endorses the development of such a program in our state to enhance the number and quality of therapists who practice here. A large number of the 3300 therapists who practice in North Carolina have expressed an interest in advancing their education in such a program. Charlotte is an ideal location with its central location, large number of therapists, and the clinical research and education available in our tertiary care hospital at CMC.

I strongly support the establishment of a Baccalaureate Program at UNCC and I look forward to cooperating with its objectives as Chairman of the North Carolina Respiratory Care Board and Medical Director of Respiratory Care at Carolinas Medical Center. Please let me know if I can be of any assistance with your effort.

Sincerely,

Joseph P. Coyle, MD

Chairman, North Carolina Respiratory Care Board Medical Director, Respiratory Care Carolinas Medical Center

JPC:cdb



Remarkable People. Remarkable Medicine.

September 14, 2005

University of North Carolina at Charlotte Office of Undergraduate Admissions 9201 University City Boulevard Charlotte, NC 28223

Dear Admissions Staff,

I'm writing in support of the proposed Bachelors Degree program in Respiratory Care which I understand is under consideration by your University. I am a practicing Respiratory Care Practitioner working at Forsyth Medical Center in Winston-Salem, NC and have been in practice 22 years here. Over 98% of my staff of 80 full-time respiratory therapists hold an Associates Degree, many of which would love the opportunity to obtain a Bachelors in their profession, not to mention the new therapists we hire annually which we prefer a Bachelors Degree and none is available in North Carolina.

New technologies, new responsibilities, licensure requirements and the future of our profession require a four-year degree. It is my hope that UNC-Charlotte will indeed offer the BSRT for the future of my profession.

Thank you for your consideration.

Sincerely,

Sia liger, DET, RLS

Bill Kiger, BS, RRT, RCP Medical/Surgical Clinical Coordinator Cardiopulmonary Services Forsyth Medical Center

336-718-5083 wckiger@novanthelath.org

Schmaling, Karen

From: Sent: To: Subject: Ryan, Neil [NRyan@unch.unc.edu] Monday, February 20, 2006 10:45 AM Schmaling, Karen BSRT degree

I am writing this letter is support of the efforts to developed a curriculum in which respiratory therapists will be able to get a Bachelor of Science in Respiratory Care. This proposed educational opportunity will not only benefit practicing respiratory therapists but will also further advance our profession and ultimately benefit patients receiving respiratory care services. Please include myself as one of your supporters in your efforts to make this happen.

Sincerely,

Neil Ryan RRT/ RCP Respiratory Care Manager UNC Hospitals 101 Manning Drive Chapel Hill, NC 27514 (919) 966-1336 Pager (919)347-1397



College of Health and Human Services 9201 University City Boulevard Charlotte, NC 28223-0001

Department of Health Behavior and Administration Office (704) 687-2957 Fax (704) 687-6122

November 23, 2006

Karen B. Schmaling Dean, College of Health and Human Services

Dear Dr. Schmaling:

Thank you for sharing the request for authorization to establish a new degree program in the College of Health and Human Services, Bachelor of Science in Respiratory Therapy (BSRT). We appreciate the extent to which you have kept the College generally, and the Department specifically, fully informed of the planned allied health offering in the Department of Kinesiology. The regional need for such a program – as well as the added-value of the BSRT program for UNC Charlotte - is well presented.

Our Department is pleased to support the proposed curriculum, especially in terms of the delivery of two courses included as part of the required BSRT course of study (HLTH3104/L Research & Statistics in Healthcare, and HLTH4104 Epidemiology). The inclusion of these courses seems especially relevant to the program's goals, to provide the associate degree-prepared registered respiratory therapist with additional education in research and evaluation. We look forward to our contribution in the educational preparation of a competent respiratory therapy workforce, leading to improvements in patient care and the education of future respiratory therapists.

Andrew Harver Professor and Chair Department of Health Behavior and Administration

cc: Jessica Hartos, Coordinator of Undergraduate Programs

Schmaling, Karen

From:Kelly, MichaelSent:Friday, November 17, 2006 6:00 PMTo:Schmaling, KarenSubject:Support Letter

Dear Dean Karen Schmaling,

I have received and reviewed your Plan to Establish a B.S. Degree Program in Respiratory Therapy in the Department of Kinesiology in the College of Health and Human Services. As Chair of the Department of Philosophy, I would like to extend my support to this plan and to the program once it has been established. In particular, I support the inclusion of PHIL 3228, Health-Care Ethics, as one of the courses in this new degree program since ethics is a vital part of the health-care profession, including respiratory therapy. So I agree that it should be included in the basic curriculum for training professionals in this particular field.

As we discussed, we already offer two sections of PHIL 3228 each semester (and one during the summer) and, based on the record over the last $1-\frac{1}{2}$ years, they are always enrolled to the maximum (looking at the advance registration for Spring 2007, I see that the two sections are already filled). So demand is already high for this course, in part because of your existing programs, as well as our own. It is thus important that we plan, as you have proposed, to add another section of PHIL 3228 in the fall and spring semesters of the coming academic years, starting when your new program is up and running. We appreciate your willingness to fund these extra sections so that we can in turn assure you they will be offered.

I might add that your proposal makes a very compelling case for this new degree program, given the need for it in North Carolina and the academic resources your College has to establish and sustain it.

Please let me know whether there is any other way we can support your new program, during the development or implementation phases.

Yours.

Michael Kelly, Chair Department of Philosophy University of North Carolina at Charlotte 9201 University City Boulevard Charlotte, NC 28223-0001 mjkelly1@email.uncc.edu (704) 687-2780 phone (704) 687-2172 fax



9201 University City Boulevard Charlotte, NC 28223-0001

School of Nursing **Associate Dean and Director** 704/687-6130 Fax: 704/687-6017

Date: November 16, 2006

To: Dr. Karen Schmaling

From: Dr. Lucille Travis

Re: Letter of support for proposed BSRT degree

We have examined the course content of NURN 4201. We believe it will be an excellent addition to the requirements for the BSRT degree. The School of Nursing supports your proposal to include NURN 4201 as a required course in the major. We will be able to accommodate enrollment of BSRT majors in NURN 4201.

Please let me know if there is anything else we can do in support of your proposal.



Carolinas Medical Center

November 27, 2006

Karen Schmaling

St., no. 11 Freeman

Dean, School of Health and Human Services UNC Charlotte Charlotte, NC

Dear Dr. Schmaling,

I am excited to hear that discussions related to the creation of a baccalaureate program for Respiratory Care in this region are coming to fruition.

A program of this type would be the first in our state which currently has a large number of Associate Degree prepared Respiratory Therapists. There are currently thirteen Associate Degree programs and no Baccalaureate Degree programs in this state. Nationally, we can find that many states have had baccalaureate programs for many years, and many states currently have more than one. Several factions within the AARC are suggesting that the BS degree will some day become the actual entry level into the profession of Respiratory Care.

Programs of this type will strengthen the knowledge base of its graduates and make them better prepared to care for the patients and become future leaders of the profession. This can be done through:

- Classes of a more advanced nature and classes focused on the various subspecialties of our profession.
- Preparation of our future educators and/or managers through classes focused on these tracts.
- Educating the students on how to conduct scientific research.

Once a program of this nature is up and running, I feel that Respiratory Care managers would certainly strongly encourage or even require completion of their BS Degree for consideration of promotion into leadership positions at their facilities.

Carolinas Medical Center would most certainly cooperate with any program needs for clinical training and experiences for student entering a baccalaureate program.

I strongly support this endeavor, as it is sorely needed. Please let me know if I can be of further assistance.

Sincerely,

Louis Lookas

Garry Dukes, BS, RRT, RCP Director, Respiratory Care Department Carolinas Medical Center Charlotte, NC

APPENDIX B

Transfer credit analyses from six RT AAS programs

General Education	CPCC	Sandhills	Durham	Catawba	Forsyth	Stanly	
Requirements		CC	Tech	Valley	Tech	CC	
Development of		ENGL	ENGL	ENGL	ENGL	ENGL	
Fundamental Skills of		1101	1101	1101	1101	1101	
Inquiry							
ENGL 1101/1103 (3)	ENICI	- ENIGI	FNG	ENICI	ENGL	ENICI	
ENGL 1102/1103 (3)	ENGL	ENGL	ENGL	ENGL	ENGL	ENGL	
	1102	1102	1102	1102	1102	1102	
MATH 1XXX (3)	MATH					MATH	
	1100					1102	
MATH1xxx, STAT 1xxx, or PHIL 2105 (3)							
Inquiry in the Sciences		BIOL 1273	BIOL	BIOL	BIOL	BIOL	
Science w lab (4)		& L; CHEM	1273 & L;	1273 & L;	1273 & L	1274 &	
		1251 & L; CHEM 1252		BIOL 1259 & L		L	
		& L		1259 & L			
Science w/out lab (3)	BIOL	BIOL 1274	BIOL	BIOL	BIOL	BIOL	
Science w/out into (3)	elective	& L	1274 & L	1274 & L	elective	elective	
Social Science	SOCY	SOCY	PSYC	* social	PSYC	PSYC	
(ANTH1101, ECON	1101;	1101,	1101	sci elec	1101 or	1101	
1101/2101, GEOG 1105,	POLS	POLS 1110		can trans	PSYC	1101	
POLS 1110 or SOCY	1110 or	or ECON		here	elective		
1101 (3)	ECON	1101					
	1101						
Themes of Liberal	LBST	LBST 1100	LBST	LBST	LBST	LBST	
Education for Private &	1100	series	1100	1100	1100	1100	
Public Life	series		series	series	series	series	
LBST 1101 to 1105 (3)							
LBST 2101 (3)	LBST						
	2101 or						
	2200						
	series						
LBST 2102 (3)							
LBST 2211 – 2215 (3)							
Total Courses in AAS	73	79	70	78	73	76	
program							
# of Transferable credits	21	28	20+	24	15/16	25	
from AAS to UNCC			depends				
			on				
			MATH				

APPENDIX C Plan of Course Offerings

Number	Title	Fall 07	Spr 08	Smr 08	Fall 08	Spr 09	Smr 09
RESP 3101	Professional Roles	X	00	00	X	0,7	0,2
RESP 3102	Outpatient Services	Х			Х		
RESP 3103	Adv Pharmacology	Х			Х		
RESP 3104	Adv Critical Care	Х			Х		
HLTH 4104	Epidemiology	Х			Х		
PHIL 3228	Healthcare Ethics	X	X		Х	X	
NURN 4201	Information Technology	X	X		X	X	
HLTH3104/3104L	Research & Statistics		X			X	
RESP 4101	Program Design		X			X	
RESP 4102	Program Administration		Х			Х	
RESP 4111	Practicum			Х	Х	Х	Х

Notes: Full time students admitted to the major who wanted to complete the degree in 12 months would take the first five courses offered in the Fall (15 SCH), then the next five courses in the Spring (15 SCH), and Practicum in the summer (9 SCH). PHIL 3228 and NURN 4201 are offered both Fall and Spring; students would typically take them in the Spring to even out their course load over the academic year, but some may choose to take one of these courses in the Fall.

APPENDIX D Library Consultation

From: Hathway, Judy
Sent: Monday, November 13, 2006 3:12 PM
To: Schmaling, Karen
Subject: BSRT overall Library Consult



To: Karen Schmaling From: Judy Hathway Date: Nov. 13 2006 Re: B.S.R.T. overall

Date of Initiation of consultation with Library Reference Personnel: 8/20/2006 Proposal No: _____

Request to add/update course: **Bachelor of Science in Respiratory Therapy** Course proposal attached

SUMMARY OF LIBRARIAN'S EVALUATION OF HOLDINGS:

Evaluator: _Judith Hathway_____ Date _Nov. 13 2006_____

1. Holdings are superior	Check one:
2. Holdings are adequate	
3. Holdings are adequate only if department purchases additional holdings	XX
4. Holdings are inadequate	

Comments:

The Library has not been collecting materials in respiratory therapy, making it difficult for us to support this degree at start up. We will be purchasing what current monographic material we can to support the specific offerings in this curriculum, but there is no depth in our collection in this specialized area at all. The Library does have material on respiratory conditions, respiratory care, and respiratory pharmacology which support the nursing curriculum, and does have materials on administration, health education, legal and policy issues in health programs and institutions generally, supporting the public health and health administrations curriculum. All of this material will be useful for the bachelors in respiratory therapy. Where the Library lacks materials is in the profession of respiratory therapy, all aspects of respiratory care programs, and respiratory patient education. This is the type of material we will be purchasing to be ready for a fall 2007 launch of the program. Our ability to provide ongoing monographic support for this program will be entirely dependent on the library budget for book acquisitions.

The Library currently does not subscribe to any print journals in respiratory therapy. We have full text access to 20-25 e-journals covering respiratory and cardiopulmonary physiology and/or diseases, respiratory medicine, or respiratory care, only a couple of these directly address the field of respiratory therapy. We have no full text access to Respiratory care, or RT: the journal for respiratory care practitioners main journals in the specialty. These are the journals that focus on respiratory therapy as a profession or a program. So for information related

to specific care modalities for specific disorders, for related equipments, critical care monitoring etc. we have sufficient access to be able to support this degree with our journal literature. We are lacking full-text access to articles in the areas covered in respiratory therapy as a profession, and our students will have to use InterLibrary Loan to fill in that gap.

From: Hathway, Judy
Sent: Monday, November 13, 2006 3:11 PM
To: Schmaling, Karen
Subject: RESP 3101 Library Consult



UNCCHARLOTTE J. Murrey Atkins Library Consultation on Library Holdings

To: Karen Schmaling From: Judy Hathway Date: Nov. 13 2006 Re: RESP 3101

Date of Initiation of consultation with Library Reference Personnel: 8/20/2006 Proposal No: ______

Request to add/update course: **RESP3101 Professional Roles & Dimensions of Respiratory Therapy** Course proposal attached

SUMMARY OF LIBRARIAN'S EVALUATION OF HOLDINGS:

Evaluator: _Judith Hathway_____ Date _Nov. 13 2006_____

Comments:

This course deals with an introduction to the history, trends, issues, and evolution of the respiratory therapy profession. Library holdings supporting these aspects of the course content are almost non-existent. The little we have is not current or detailed enough, or is buried within the early chapters of texts on the specifics of respiratory care. In order to support the start up of this course the Library will be actively pursuing additional monographic materials targeted to the history and development of both the respiratory therapy profession and the respiratory care sciences.

The other aspect of this course is an introduction to the theories of respiratory care itself. Library holdings in this aspect are much better as respiratory care is a small part of the nursing curriculum. Though we are adequate to start this course in this area, we will also be pursuing additional targeted texts.

The Library currently subscribes to no professional respiratory therapy journals in print. Though we do have full text access to some online journals in the respiratory care area, none are targeted to the professional aspects of the respiratory therapy field. Material specific to the respiratory therapy

profession is included in the CINAHL and to a lesser degress Medline databases, and articles from these sources can be requested through InterLibrary Loan.

From:Hathway, JudySent:Monday, November 13, 2006 3:11 PMTo:Schmaling, KarenSubject:RESP 3102 Library Consult



To: Karen Schmaling From: Judy Hathway Date: Nov. 13 2006 Re: RESP 3102

Date of Initiation of consultation with Library Reference Personnel: 8/20/2006 Proposal No: _____

Request to add/update course: **RESP3102** Outpatient Services In Respiratory Therapy Course proposal attached

SUMMARY OF LIBRARIAN'S EVALUATION OF HOLDINGS:

Evaluator: _Judith Hathway_____ Date _Nov. 13 2006_____

	Check one:
1. Holdings are superior	
2. Holdings are adequate	
3. Holdings are adequate only if department purchases	XX
additional holdings	
4. Holdings are inadequate	

Comments:

Library monographic holdings are just adequate to begin this course. While we have numerous texts on outpatients services and or home care that do have chapters related to respiratory care, there are only a few titlesdedicated this topic and they are not very current. The same is true for reimbursement issues for outpatient respiratory care. We do have some government documents in the area, included some targeted to North Carolina. We will be purchasing additional material in this area before the start of this curriculum in fall 2007.

The Library has access to 23 full-text online journals dealing with topics related to respiration, respiratory conditions and therapy of same, as well to several electronic government documents dealing with outpatient reimbursement mechanisms for respiratory inpatient and outpatient care and drugs. The journal literature overall and our full-text online access will support topics in this course.

Both CINAHL and Medline adequately cover the range of topics to be covered in this course, and articles from these sources can be acquired through InterLibrary Loan.

From:Hathway, JudySent:Monday, November 13, 2006 3:11 PMTo:Schmaling, KarenSubject:RESP 3103 Library Consult



To: Karen Schmaling From: Judy Hathway Date: Nov. 13 2006 Re: RESP 3103

Date of Initiation of consultation with Library Reference Personnel: 8/20/2006 Proposal No: ______

Request to add/update course: RESP3103 Advanced Pharmacology in Respiratory Therapy

Course proposal attached

SUMMARY OF LIBRARIAN'S EVALUATION OF HOLDINGS:

Evaluator: _Judith Hathway_____ Date _Nov. 13 2006_____

Comments:

Currency of information is critical in any course dealing with drugs and drug therapy. The Library does have several specific texts related to pharmacology in respiratory therapy, however the newest of these texts is 1998, which is too old to be useful. We will be weeding these texts, probably, before this new course begins. The Library will be purchasing newer targeted materials to support this course, though our ability to sustain currency in this area will be entirely dependent on the Library's future budget for monographic purchases. The Library does have a good collection of nursing texts covering drug therapy in all aspects including those of importance to respiratory therapy. We do keep a wide range of current texts on the therapeutic use of drugs in all areas.

We do have access to one online full-text journal, <u>Pulmonary pharmacology &</u> therapeutics, specifically geared to this course, and to an additional 23 titles that will contain articles on drug therapy in respiratory conditions. CINAHL and Medline both cover the topics in this course for the most current information, and if we do not have full text access to the articles cited, they can be obtained through InterLibrary Loan.

From:Hathway, JudySent:Monday, November 13, 2006 3:11 PMTo:Schmaling, KarenSubject:RESP 3104 Library Consult



UNCCHARLOTTE J. Murrey Atkins Library Consultation on Library Holdings

To: Karen Schmaling From: Judy Hathway Date: Nov. 13 2006 Re: RESP 3104

Date of Initiation of consultation with Library Reference Personnel: 8/20/2006 Proposal No: ______

Request to add/update course: **RESP3104 Advanced Critical Care Monitoring** Course proposal attached

SUMMARY OF LIBRARIAN'S EVALUATION OF HOLDINGS:

Evaluator: _Judith Hathway_____ Date _Nov. 13 2006_____

	Check one:
1. Holdings are superior	
2. Holdings are adequate	XX
3. Holdings are adequate only if department purchases additional holdings	
6	
4. Holdings are inadequate	

Comments:

Critical care is a major nursing topic and the Library has numerous current texts in this area, including 10 texts specific to respiratory critical care, 3 texts on hemodynamic monitoring, and 5 current texts on mechanical ventilation, as well as a number of e-books on critical care topics. We will be try to supplement these texts with more discipline specific texts if we can.

The Library has access to several full-text journals covering critical care medicine, all covering topics related to critical respiratory care, hemodynamic montoring, and mechanical ventilation.

CINAHL and Medline both cover the topics in this course for the most current information. Those articles not in journals the Library has access to can be acquired through InterLibrary Loan.

From:Hathway, JudySent:Monday, November 13, 2006 3:11 PMTo:Schmaling, KarenSubject:RESP 4101 Library Consult



To: Karen Schmaling From: Judy Hathway Date: Nov. 13 2006 Re: RESP 4101

Date of Initiation of consultation with Library Reference Personnel: 8/20/20	06
Proposal No:	

Request to add/update course: **RESP4101 Program Design, Implementation, and Outcomes evaluation** Course proposal attached

SUMMARY OF LIBRARIAN'S EVALUATION OF HOLDINGS:

Evaluator: _Judith Hathway_____ Date _Nov. 13 2006_____

Comments:

The Library has a wide selection of both monographic and serial resources on health services and patient education program planning, implementation, and evaluation supporting the Doctoral program in Public Health. That material will support this course, though none of it is specific to respiratory therapy programs or patient education in respiratory care. The Library will attempt to acquire some targeted materials, though there aren't a lot of monographic materials available in this specific area. While we have access to a number of full-text titles in areas touching on respiratory medicine, care, and therapy we currently have no access to those professional journals where programmatic and patient education articles regularly appear. Students will need to use InterLibrary Loan to obtain discipline specific planning, implementation, and evaluation articles.

From: Hathway, Judy
Sent: Monday, November 13, 2006 3:12 PM
To: Schmaling, Karen
Subject: RESP 4102 Library Consult



To: Karen Schmaling From: Judy Hathway Date: Nov. 13 2006 Re: RESP 4102

Date of Initiation of consultation with Library Reference Personnel: 8/20/2006 Proposal No: ______

Request to add/update course: **RESP4102 Program Administration** Course proposal attached

SUMMARY OF LIBRARIAN'S EVALUATION OF HOLDINGS:

Evaluator: _Judith Hathway_____ Date _Nov. 13 2006_____

1. Haldinga are superior	Check one:
1. Holdings are superior	·····
2. Holdings are adequate	
3. Holdings are adequate only if department purchases	XX
additional holdings	
4. Holdings are inadequate	
	<u></u>

Comments:

The Library has a wealth of material on all aspects of the administration of health services programs as we support a master's degree in health administration. These materials generally support this course. However, we have no monographic resources in the targeted area of respiratory therapy program administration currently in the collection. We will be purchasing materials on the administration, financial and human resources aspects of RT programs, and on the legal and policy issues in the area. We have a good selection of journals and full-text resources supporting health services administration, but again these titles do not specifically cover respiratory therapy programs, policies, and issues in any depth. CINAHL is the major index covering respiratory therapy topics, and relevant articles may be obtained through InterLibrary Loan to support this course.

From:Hathway, JudySent:Tuesday, November 14, 2006 7:20 AMTo:Schmaling, KarenSubject:RESP4111 Library Consult



To: Karen Schmaling From: Judy Hathway Date: Nov. 13 2006 Re: RESP 4111

Date of Initiation of consultation with Library Reference Personnel: 8/20/2006 Proposal No: ______

Request to add/update course: **RESP4111 Practicum** Course proposal attached

SUMMARY OF LIBRARIAN'S EVALUATION OF HOLDINGS:

Evaluator: _Judith Hathway_____ Date _Nov. 13 2006_____

	Check one
 Holdings are superior Holdings are adequate 	XX
3. Holdings are adequate only if department purchases	
additional holdings	
4. Holdings are inadequate	

Comments:

The level of Library support needed for a capstone project such as this course is always difficult to determine. Our monographic support for respiratory therapy is not that good overall, strongest in those areas shared in common with nursing, weakest in those areas related to respiratory therapy as a profession or a program. Our journal and e-journal full-text access is much stronger, though we do not have access to the full text of the most directly related journals in the field. We have the indexing tools to support the Library component of this practicum, and if we do not have direct access to the required articles, they can be requested from InterLibrary Loan. Overall we should be able to support this course.

Online Journals in the area of respiratore care/therapy

American journal of physiology Lung cellular and molecular physiology American journal of respiratory and critical care medicine (Online) American journal of respiratory cell and molecular biology (Online) Annals of thoracic surgery (Online) BMC pulmonary medicine Canadian journal of respiratory therapy Cardiopulmonary physical therapy journal Chest Current medical literature. Respiratory medicine (Online) European respiratory journal (Online) European respiratory review Experimental lung research Internet journal of pulmonary medicine Internet journal of thoracic and cardiovascular surgery Journal of applied physiology (Bethesda, Md. : 1985 : Online) Journal of cardiothoracic surgery Journal of thoracic and cardiovascular surgery (Online) Lung Lung cancer (Amsterdam, Netherlands) Pediatric pulmonology (Online) Pneumologe (Online) Proceedings of the American Thoracic Society Pulmonary pharmacology & therapeutics (Online) Pulmonary pharmacology (Online) Respiration physiology (Online) Respiratory medicine (Online) Respiratory physiology & neurobiology (Online) Respiratory research (Online) Respirology (Carlton, Vic. : Online) Thorax

APPENDIX E Budget Projections for the First Three Years of Operation

Projected Funding for New Degree Program Bachelor of Science in Respiratory Therapy Regular Term <u>2007-2008</u> (Based on 2006-2007 Change in Student Credit Hours)

		Change in		Instructional - Position					
Program	Student Credit Hours		Funding Factors		Instructional Positions Required				
Category	Undergrad	Masters	Doctoral	Undergrad	Masters	Doctoral	Undergrad	Masters	Doctoral
Category I				708.64	169.52	115.56	0.000	0.000	0.000
Category II				535.74	303.93	110.16	0.000	0.000	0.000
Category III				406.24	186.23	109.86	0.000	0.000	0.000
Category IV				232.25	90.17	80.91	0.000	0.000	0.000

			Total Positions Required		0.000
			Instructional - Position Salary Rate	:	\$72,431
		101-1310	Instructional Salary Amount		\$0
			Other Academic Costs	44.89300%	0
		Purpose 101	Total Academic Requirements		\$0
Fringe rates for staff FICA @ 7.65% Retirement @ 06.82% Medical @ \$3,748		Purpose 151	Library	11.48462%	0
		Purposes 152, 160, 170 180	General Instit Support Neg Adj Factor	54.04980% 50.00000%	0 n/a
Fringes for faculty salaries FICA @ 7.65% Retirement @ 11.16% Medical @ \$3,748	\$0 \$0 \$0		In-state SCHs Financial Aid (<u>in-state</u>)	0 67.99800%	0
	\$0		Total Requirements		\$0

Institution	UNC Charlott	e	Date	April 20, 200	17
Program (API#, Name, Level)	51.0908 Resp	iratory Therapy	•	<u> </u>	
Degree(s) to be Granted		ience in Respira	tory Therapy	Program Year	2007-08
			INDING REQUIRE		
	Reallocation of				
	Present		Federal/State or		
	Institutional	Enrollment	Other Non-state		
	Resources	Increase Funds	Funds (Identify)	New Allocations	Total
101 Regular Term Instruction 1210 SPA Regular Salaries					\$0
1110 EPA Non-teaching Salaries					0
The Er Anon-teaching Salahes					-
1310 EPA Academic Salaries	55,000	0	0		55,000
Lecturer	55,000				
1810 Social Security	4,208		0		4,208
1820 State Retirement	6,138		0		6,138
1830 Medical Insurance (3432*X)	3,432				3,432
2000 Supplies and Materials	4,000				4,000
2300 Educational Supplies	2,000				2,000
2600 Office Supplies	2,000				2,000
3000 Current Services	4,000				4,000
3100 Travel	2,000				
3200 Communications	1,000				
3400 Printing & Binding	1,000				
5000 Capital Outlay (Equipment)	2,000				2,000
5100 Office Equipment	0				
5200 EDP Equipment	2,000				
TOTAL Regular Term Instruction	\$78,778	\$0	\$0	\$0	\$78,778
151 Libraries					
5000 Capital Outlay (Equipment)	7,500	0			7,500
5600 Library Book/Journal	7,500				
TOTAL Libraries	\$7,500	\$0	\$0	\$0	\$7,500
			**		¢:,000
189 General Institutional Support					0
2000 Supplies and Materials 2600 Office Supplies					0
3000 Current Services					0
3200 Communications					-
3400 Printing & Binding					
5000 Capital Outlay (Equipment)					0
5100 Office Equipment 5200 EDP Equipment					
TOTAL General Inst. Support	\$0	\$0	\$0	\$0	\$0
TOTAL ADDITIONAL COSTS	\$86,278	\$0	\$0	\$0	\$86,278
		-			

NOTE: Accounts may be added or deleted as required.

Projected Funding for New Degree Program Bachelor of Science in Respiratory Therapy Regular Term <u>2008-2009</u> (Based on 2007-2008 Change in Student Credit Hours)

	Change in		Instructional - Position						
Program	Stud	Student Credit Hours		Funding Factors		Instructional Positions Required		Required	
Category	Undergrad	Masters	Doctoral	Undergrad	Masters	Doctoral	Undergrad	Masters	Doctoral
Category I				708.64	169.52	115.56	0.000	0.000	0.000
Category II				535.74	303.93	110.16	0.000	0.000	0.000
Category III	600			406.24	186.23	109.86	1.477	0.000	0.000
Category IV				232.25	90.17	80.91	0.000	0.000	0.000

			Total Positions Required		1.477 \$72,431
		101-1310	Instructional Salary Amount		\$106,978
			Other Academic Costs	44.89300%	48,025
		Purpose 101	Total Academic Requirements		\$155,003
Fringe rates for staff FICA @ 7.65% Retirement @ 06.82% Medical @ \$3,748		Purpose 151	Library	11.48462%	17,801
		Purposes 152, 160, 170 180	General Instit Support Neg Adj Factor	54.04980% 50.00000%	83,779 n/a
Fringes for faculty salaries		100, 110 100		00.0000070	1, 4
FICA @ 7.65%	\$8,184		In-state SCHs	0	
Retirement @ 11.16%	\$11,939		Financial Aid (<u>in-state</u>)	67.99800%	0
Medical @ \$3,748	\$5,536		Total Baguiramonto		¢256 592
	\$25,658		Total Requirements		\$256,583

SUMMARY OF ESTIMATED ADDITIONAL COSTS FOR PROPOSED PROGRAM/TRACK

Institution Program (API#, Name, Level)	UNC Charlotte 51.0908 Respi	ratory Therapy	Date	April 20, 2007 Program Year 2008-09		
Degree(s) to be Granted	Bachelor of Sc	2008-09				
	ADDITIONAL FUNDING REQUIRED - BY SOURCE					
	Reallocation of Present Institutional Resources	Enrollment Increase Funds	Federal/State or Other Non-state Funds (Identify)	New Allocations	Total	
101 Regular Term Instruction 1210 SPA Regular Salaries					\$0	
1110 EPA Non-teaching Salaries					0	
1310 EPA Academic Salaries	0	106,978	0		106,978	
1810 Social Security	0	8,184	0		8,184	
1820 State Retirement		11,939			11,939	
1830 Medical Insurance		5,536			5,536	
2000 Supplies and Materials 2300 Educational Supplies		10,372 6,372			10,372	
2600 Office Supplies		4,000				
3000 Current Services		8,000			8,000	
3100 Travel		4,000				
3200 Communications		2,000				
3400 Printing & Binding		2,000				
5000 Capital Outlay (Equipment)		3,994			3,994	
5100 Office Equipment 5200 EDP Equipment		3,994				
TOTAL Regular Term Instruction	\$0	\$155,003	\$0	\$0	\$155,003	
5000 Capital Outlay (Equipment)		17.801			17,801	
5600 Library Book/Journal		17,801				
TOTAL Libraries	\$0	\$17,801	\$0	\$0	\$17,801	
189 General Institutional Support						
2000 Supplies and Materials 2600 Office Supplies		27,900 27,900			27,900	
3000 Current Services		27,900			27,900	
3200 Communications 3400 Printing & Binding		13,950 13,950				
5000 Capital Outlay (Equipment)		27,979			27,979	
5100 Office Equipment 5200 EDP Equipment		14,000 13,979				
TOTAL ADDITIONAL COSTS	\$0	\$256,583	\$0	\$0	\$256,583	

NOTE: Accounts may be added or deleted as required.

Projected Funding for New Degree Program Bachelor of Science in Respiratory Therapy Regular Term <u>2009-2010</u> (Based on 2008-2009 Change in Student Credit Hours)

		Change in		Instructional - Position					
Program	Student Credit Hours		Funding Factors			Instructional Positions Required			
Category	Undergrad	Masters	Doctoral	Undergrad	Masters	Doctoral	Undergrad	Masters	Doctoral
Category I				708.64	169.52	115.56	0.000	0.000	0.000
Category II				535.74	303.93	110.16	0.000	0.000	0.000
Category III	500			406.24	186.23	109.86	1.231	0.000	0.000
Category IV				232.25	90.17	80.91	0.000	0.000	0.000

			Total Positions Required		1.231
			Instructional - Position Salary Rate		\$72,431
		101-1310	Instructional Salary Amount		\$89,148
			Other Academic Costs	44.89300%	40,021
		Purpose 101	Total Academic Requirements		\$129,169
Fringe rates for staff FICA @ 7.65% Retirement @ 06.82% Medical @ \$3,748		Purpose 151	Library	11.48462%	14,835
		Purposes 152, 160, 170 180	General Instit Support Neg Adj Factor	54.04980% 50.00000%	69,816 n/a
Fringes for faculty salaries FICA @ 7.65% Retirement @ 11.16% Medical @ \$3,748	\$6,820 \$9,949 <u>\$4,613</u> \$21,382	100, 110 100	In-state SCHs Financial Aid (<u>in-state</u>) Total Requirements	0 67.99800% _	0 \$213,820

Institution	UNC Charlotte		Date	April 20, 200	il 20, 2007		
Program (API#, Name, Level)	51.0908 Resp	iratory Therapy					
Degree(s) to be Granted	Bachelor of Sc	ience in Respira	tory Therapy	Program Year	2009-10		
	ADDITIONAL FUNDING REQUIRED - BY SOURCE						
	Reallocation of Present Institutional Resources	Enrollment Increase Funds	Federal/State or Other Non-state Funds (Identify)	New Allocations	Total		
101 Regular Term Instruction 1210 SPA Regular Salaries					\$0		
1110 EPA Non-teaching Salaries					0		
1310 EPA Academic Salaries	55,000	89,148 89,148	0		144,148		
1810 Social Security 1820 State Retirement 1830 Medical Insurance 2000 Supplies and Materials 2300 Educational Supplies 2600 Office Supplies	<u>4,208</u> 0	6,820 9,949 4,613 8,639 4,639 4,000	0		11,028 9,949 4,613 8,639		
3000 Current Services 3100 Travel 3200 Communications 3400 Printing & Binding		8,000 4,000 2,000 2,000			8,000		
5000 Capital Outlay (Equipment) 5100 Office Equipment 5200 EDP Equipment		2,000			2,000		
TOTAL Regular Term Instruction	\$59,208	\$129,169	\$0	\$0	\$188,377		
<u>151 Libraries</u> 5000 Capital Outlay (Equipment) 5600 Library Book/Journal		14,835 14,835			14,835		
TOTAL Libraries	\$0	\$14,835	\$0	\$0	\$14,835		
189 General Institutional Support 2000 Supplies and Materials 2600 Office Supplies		23,300 23,300			23,300		
3000 Current Services		23,300			23,300		
3200 Communications 3400 Printing & Binding		11,650 11,650					
5000 Capital Outlay (Equipment) 5100 Office Equipment 5200 EDP Equipment		23,216			23,216		
TOTAL ADDITIONAL COSTS	\$59,208	\$213,820	\$0	\$0	\$273,028		

SUMMARY OF ESTIMATED ADDITIONAL COSTS FOR PROPOSED PROGRAM/TRACK

NOTE: Accounts may be added or deleted as required.